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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) BHC 032001
Application Number 10/575,027		Filed July 30, 2007
For TETRADYDRO-NAPHTHALENE AND UREA DERIVATIVES		
Art Unit 1625	Examiner David K. Odell	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	_____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	_____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	<u>1110.00</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	_____

- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card via EFS.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-3402.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Representative Capacity. Registration Number 30,595.
- ☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. _____

Signature

Richard J. Traverso

Typed or printed name

September 28, 2009

Date

(703) 243-6333

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

- ☐ Total of _____ forms are submitted.

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Services as First Class Mail in an envelope addressed to: Commissioner of Patents, P O Box 1450, Alexandria, VA 22313-1450 on: Sept 28 2009

Name: Richard J. Traverso

Signature: Richard J. Traverso